**Baltimore County Provider Council (BCPC)**

**Board Application**

**Name:**

**Street Address:**

**City: State: Zip:**

**Phone: Business: Cell: Home:**

**Email:**

**Employer:**

**Position:**

**Brief Description of current job duties:**

**Please answer the following questions as completely as possible:**

**1. What is your reason for wanting to serve on the BCPC Board?**

**2. Which committee(s) are you interested in serving on?**

 **\_\_\_\_ Program**

 **\_\_\_\_ Philanthropy**

 **\_\_\_\_ Membership**

 **\_\_\_\_ Marketing/Communication**

 **\_\_\_\_ Scholarship**

 **\_\_\_\_ Special Events**

**3. What special skills or experiences do you bring to the board and to the committee(s) you have chosen?**

**4. What other boards, organizations, and committees do you currently serve on and/or have served on in the past?**

**5. Serving as a member of the BCPC board requires regular attendance at monthly (Sept.-May) board meetings held directly after the educational events on the 3rd Tuesday, support of the monthly educational events, and duties of the committee on which you will serve. The annual calendar also has 2 luncheons and 2 Happy Hour socials when attendance is encourage. Do you feel you can provide the time commitment needed to fulfill these duties?**

 **Yes\_\_\_\_ No\_\_\_\_**

**6. How long have you been a member of BCPC? (Those serving on the Board must have been a member of BCPC for at least one year)**

**Please read over the Bylaws (contained on the BCPCOUNCIL.ORG website) to become familiar with the organization.**

**Please submit this completed form and a resume/curriculum vitae to our nominating committee:**

bocpc1@gmail.com

Patty Haw, President Baltimore County Provider Council